

**Policy: 14.03** 

Title Social Services Block Grant Provider Documentation

Clarence H. Carter

Approved by Approval Date: 03/23/2021

Effective Date: 04/01/2021

Authority Tenn. Code Ann. 71-6-103

45 CFR 96.70 et seq.

42 CFR §§1397

**Application** SSBG State Office and Contracted Providers

#### **Policy Statement**

Agencies that contract with the Tennessee Department of Human Services through the Social Services Block Grant must submit documentation in support of program administration.

#### **Reason for Policy**

The purpose of this policy is to provide uniform compliance parameters for staff and agencies regarding the documentation and forms necessary for the successful administration of the Social Services Block Grant program.

#### **Policy**

A. Abuse Reporting Log

State law requires any individual who has knowledge of or suspects the abuse, neglect, or exploitation (A/N/E) of a child or vulnerable adult to report their concerns immediately to the appropriate department. Abused adults must be reported to Adult Protective Services (APS) and abused children to the Department of Children's Services.

Social Services Block Grant (SSBG) providers must maintain an <u>HS-3130</u> Abuse Reporting Log to document all reports to APS.

Date of Last Review: 03/23/2021 Supersedes: See "Supersedes" section in this document Effective Date: 04/01/2021 RDA SW22

Page 1 of 5

#### **B.** Incident Reports

Providers are required to report all critical incidents involving SSBG clients to the APS hotline and complete a written report within forty-eight (48) hours to be submitted to Tennessee Department of Human Services (TDHS) SSBG staff.

In circumstances where the critical incident involves agency staff, providers must investigate the claim and submit a completed investigation report within thirty (30) days.

Generally, providers maintain the discretion to remove, suspend, and return their employees to service. However, in circumstances where agency staff are suspected of misconduct, TDHS SSBG may request the involved staff member be removed from the homes of all SSBG clients until provider and TDHS investigations are completed, and TDHS has granted approval for the staff member to return.

#### C. Client Surveys

Adult Day Service (ADS) providers must encourage each client to complete a customer satisfaction survey upon termination. within fifteen (15) days of the end of each contract, ADS providers must submit the average of all responses to SSBG. See <u>SSBG Documentation Procedures</u>

## D. Corrective Action Plans

TDHS SSBG may require providers to submit a corrective action plan in the following circumstances:

- In response to a periodic monitoring review completed by the TDHS Office of the Inspector General (OIG) in which findings occur,
- In response to a notice of deficiency from TDHS SSBG staff regarding contractual and/or policy requirements, or
- If the adult day service customer surveys average to a satisfaction rate of less than eighty percent (80%).

## E. Annual Service Proposal

Refer to the Annual Service Proposal section in policy <u>14.02 SSBG Financial Accountability</u>.

## F. Annual Program Evaluation

TDHS SSBG believes continuous quality improvement (CQI) is a critical aspect of successful service provision. To that end, TDHS SSBG providers are required to complete the <a href="HS-3131 SSBG Annual Program Evaluation">HS-3131 SSBG Annual Program Evaluation</a> form within ninety (90) days of the completion of each contract term. The grantee/contractor's Executive Director is responsible for ensuring that this report is prepared.

## G. Social Assessment and Service Plan

The <u>HS-3116 SSBG Social Assessment and Service Plan</u> is a single form used to document both an assessment of a client's well-being and a plan of action for the provider. This form is required upon case open and at regular intervals thereafter; see <u>SSBG Documentation Procedures</u>.

#### H. Risk Assessment Matrix

The <u>HS-3134 Risk Factor Matrix</u> is used to assign a numerical score to each client to represent their overall well-being. The form must be completed and submitted along with each HS-3116 Social Assessment and Service Plan:

- 1. when each case is opened,
- 2. at regular intervals (see Social Assessment and Service Plan section in SSBG Documentation Procedures), and
- 3. at case closure (if the client is available).

The first and last pages of each matrix must be saved in the client's file.

Date of Last Review: 03/23/2021 Supersedes: See "Supersedes" section in this document

#### I. Change in Circumstance Form

The <u>HS-3109 SSBG Change in Circumstances</u> (CIC) form is designed to update SSBG program staff when services are started and ended, or when an APS referral is closed without services being provided.

The CIC form is required *any time* a client is removed from the waiting list. This includes the start of services and/or removal for any other reason. The form is also required upon closure of every case.

This policy is effective for all recipients of SSBG services whether incomeeligible (IE) or without-regard-to-income (WRI), and both homemaker and adult day services clients.

#### J. Monthly Client Services Report

The <u>HS-3479 SSBG Monthly Service Report</u> is required from all providers. This report is the document through which the agencies declare the number of service units provided each month. SSBG state office staff use units as a basis for calculating provider efficiency. See Units of Service section of <u>SSBG Fiscal Accountability Procedures</u> and policy <u>14.01 SSBG Eligibility</u>.

#### K. TDHS Annual Report

Every year, TDHS submits a report to the state giving the status of each division and highlighting success stories from clients around the department. In order to receive program information in a standardized fashion, TDHS issues a template seeking answers to specific questions and requesting statistics.

Because SSBG clients are served by contracting providers, each year this template is forwarded to the agencies for completion.

## L. Missed Appointment Log

In order to minimize impact to clients caused by provider-canceled appointments, each provider is required to document the appointments they cancel that are not rescheduled for the same week. Appointment cancelations must be minimized, using alternate staff when necessary. <a href="HS-3480 Missed Appointment Log">HS-3480 Missed Appointment Log</a>

## M. Grant Disbursement Reconciliation Report

Each provider must submit a grant disbursement reconciliation report within sixty (60) days of contract end. The report must include documentation indicating the total dollar amounts granted and spent. At their discretion, providers may use the final invoice as both invoice and reconciliation report. If the provider invoiced and received more than allowed by contract, they will submit a refund along with the grant disbursement reconciliation report.

Any expenses invoiced after the grant disbursement reconciliation report is submitted will be considered unallowable and therefore, non-reimbursable. If the agency does not provide a grant disbursement reconciliation report, they will be considered ineligible for reimbursement and must refund all payments made under the contract.

The provider must close out its accounting records at the end of the contract term in such a way that no reimbursable funding expenditures and/or revenue collections are carried forward.

#### N. Waiting List

Providers must maintain a waiting list of all clients the agency cannot serve within seven (7) days. Waiting clients must be served in chronological order, though, on occasion, APS staff may request an individual with time-sensitive needs be moved up the list into the next available SSBG slot. The provider must ensure that no client remains on the waiting list more than ninety (90) days and must maintain regular contact with all waiting clients. The grantee

Date of Last Review: 03/23/2021 Supersedes: See "Supersedes" section in this document shall consult with APS and/or SSBG program staff prior to any APS client being denied services. (See <u>SSBG Documentation Procedures</u>)

Supporting Documents <u>HS-2972 Homemaker Request for Services</u>

HS-3109 SSBG Change in Circumstances

HS-3115 SSBG Service Proposal

HS-3116 SSBG Social Assessment and Service Plan

HS-3130 Abuse Reporting Log

HS-3131 SSBG Annual Program Evaluation

**HS-3134 Risk Factor Matrix** 

HS-3465 Social Services Block Grant Invoice for Reimbursement

HS-3475 SSBG Authorized Signatories

HS-3479 SSBG Monthly Service Report

HS-3480 Missed Appointment Log

HS-3489 SSBG Refusal of Services

HS-3488 SSBG Client Waiting List

14.01 SSBG Eligibility

14.02 SSBG Financial Accountability

SSBG Fiscal Accountability Procedures

**SSBG Documentation Procedures** 

Retention of Records Records Management Policy Summary for 14.03 SSBG Documentation

### **Definitions/Acronyms**

Term Definition/Acronym

**Agency** Provider

**A/N/E** Abuse/Neglect/Exploitation

APS Adult Protective Services

CIC Change in Circumstances

**CQI** Continuous Quality Improvement

IE Income Eligible

Date of Last Review: 03/23/2021 Supersedes: See "Supersedes" section in this document Effective Date: 04/01/2021 RDA SW22

Page 4 of 5

**Provider** Agency

SSBG Social Services Block Grant

**TDHS** Tennessee Department of Human Services

WRI Without Regard to Income

#### **SUPERSEDES**

Social Services Block Grant (SSBG) Policy and Procedures Manual

- Abuse Reporting, Page 21
- Incident Reports and Safety Plans, Page 22
- Annual Service Proposal, Page 26
- Program Evaluation/Annual Report, Pages 26-27
- Social Assessment and Service Plan, Page 28
- Applicable text, Purposes of Standards, Page 44
- Social Assessment, Reassessment, and Service Plan, Page 45
- Social Assessment and Reassessment, Page 45
- Service Plan, Page 45
- Risk Assessment Matrix, Page 28
- Change in Circumstances, Page 28
- Changes in Circumstances, Pages 13-14
- Depletion of Funding, Page 20
- Special Authorization Procedures for Protective Service Homemaker for Adults, Page 43

# APPROVAL HISTORY Approved by Approver Title Approved Date Effective Date Clarence H. Carter Commissioner 03/23/2021 04/01/2021

REVISION HISTORY			
Date	Version	Location of Change	Description/Reason for Change
03/23/2021	04/01/2021	New Document	New Document

Date of Last Review: 03/23/2021 Supersedes: See "Supersedes" section in this document Effective Date: 04/01/2021 RDA SW22